Minority Health Facts

ASIANS & PACIFIC ISLANDERS

in Rhode Island

INTRODUCTION

This report provides information about major health indicators for the Asian and Pacific Islander population living in Rhode Island. An *Asian or Pacific Islander* (API) is defined by the Office of Management and Budget (Directive 15) as a person having origins in the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, India, Japan, Korea, the Philippine Islands, and Samoa. This report presents data on socio-economic characteristics, morbidity and mortality, behavioral risks, infectious diseases, maternal and child



health and access to healthcare among Asian and Pacific Islander residents in comparison to the overall state population. Please note that race and ethnic status for some Health Department data sets are based on self-identification. Due to the nature in which data are collected, some statistics may be reported only for Asians rather than both Asians *and* Pacific Islanders (API).

POPULATION DEMOGRAPHICS

According to the 2000 Census, there were 24,232 Asian and Pacific Islanders living in Rhode Island (RI). Approximately 2.3% of the RI population is of Asian descent and about 0.1% is of Pacific Islander descent. Forty-five percent (45%) of the Asian and Pacific Islander population in RI was born in a foreign country. The median age for the Asian American population is 26.6 years whereas the overall state median age is 36.7 years. Over 85% of the Asian American population is under the age of 50; 70% of the overall state population is under the age of 50.

SOURCE: U.S. Bureau of the Census, 2000

SOCIO-ECONOMIC CHARACTERISTICS

The following are socio-economic characteristics of Rhode Island's Asian population from the 2000 Census. These characteristics may affect the health of the Asian residents of Rhode Island.

- There are almost *two times* as many Asians living below poverty as the overall state population.
- The median household income for Asians is \$36,472—approximately \$5,600 less than the state average.
- The unemployment rate for Asians is *slightly higher* than the rate for the overall state population.

Table A: Socio-Economic Data

	ASIAN	STATE
Percent of population living below poverty*	22.0	11.9
Percent of population that is unemployed*	4.6	3.6
Median household income*	\$36,472	\$42,090
High school graduation rate** (percent)	81.0	81.0

SOURCES: *U.S. Bureau of the Census, 2000. **RI Kids Count Factbook, 2004.

MORTALITY

• For the period between 1999-2002, heart disease, cancer, stroke, and chronic respiratory diseases were four leading causes of death among the Asian and Pacific Islander and the overall state populations. *Unintentional injuries* is the fourth leading cause of death for Asians, but it is not ranked in the top five leading causes of death for the overall state population.

BEHAVIORAL RISK FACTORS

- The percent of the Asian and Pacific Islander population that is overweight is *lower* than the overall state population.
- The Asian and Pacific Islander population has *lower* rates of obesity than the overall state population.



Table B: Leading Causes of Death, 1999-2002

#	ASIAN	STATE
1	Heart Disease	Heart Disease
2	Cancer	Cancer
3	Stroke	Stroke
4	Unintentional Injuries	Chronic Respiratory Diseases
5	Chronic Respiratory Diseases	Pneumonia/Influenza

SOURCE: RI Dept. of Health, Division of Vital Records, RI Resident Deaths, ICD-10 Codes, 1999-2002.

Table C: Indicators of Behavioral Risk Factors

	ASIAN	STATE
Percent of adult population ¹ that participates in light to moderate activity for at least 30 minutes per day	34.9	36.9
Percent of adult population that is overweight ² (20 yrs+)	33.4	56.9
Percent of adult population that is obese ³ (20 yrs+)	4.8	18.4
Percent of adult population that consumes at least five daily servings of fruits and vegetables per day	25.9	28.2
Percent of adult population that smokes cigarettes	25.7	23.0
Percent of adult population that consumed 5+ drinks on one or more occasions in past month (binge-drinking)	17.7	16.9

SOURCE: RI Behavioral Risk Factor Surveillance System 2000, Healthy People 2010 (2000-03 frequencies).

¹Adult population refers to individuals 18 years and older unless otherwise specified.

 $^{^2}$ Overweight defined by CDC as BMI \geq 25.

 $^{^{3}}$ Obesity defined by CDC as BMI \geq 30.

Table D: Incidence Rates of Infectious Diseases: Cases per 100,000 Population

INFECTIOUS DISEASES	ASIAN	STATE
Gonorrhea*	43.0	93.0
Chlamydia*	465.0	286.0
Tuberculosis**	38.4	4.4
HIV/AIDS***	+	12.8

SOURCES:

RI Dept. of Health, Office of Communicable Diseases,

*Sexually Transmitted Diseases (STD) Surveillance Data 2003.

**Tuberculosis Database 2003.

***RI Epidemiologic Profile of HIV/AIDS 2002.

+Data too small for meaningful analysis.

Table E: Indicators of Maternal and Child Health

	ASIAN	STATE
Percent of pregnant women with delayed prenatal care*	15.2	9.1
Rate of births to teens ages 15-19 (per 1,000 teens)*	42.9	33.1
Percent of births to mothers with less than 12 years of education*	17.0	15.0
Percent of infants with low birth weight (<5.5 lbs)*	9.3	7.5
Infant mortality rate (per 1,000 live births)**	8.4	6.6
Percent of children in poverty (<18 yrs)***	26.0	17.0
Percent of children under age 6 with high lead levels (≥10 ug/dL)****	12.0	7.0

SOURCES: *RI Dept. of Health, Division of Family Health, Maternal and Child Health Database.

** Infant Mortality Database, 1998-2002.

*** U.S. Bureau of the Census, 2000.

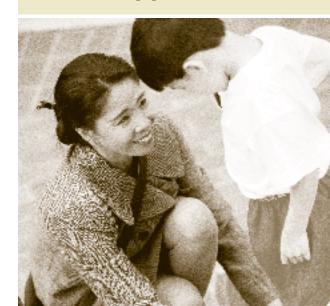
**** RI Dept. of Health, Childhood Lead Poisoning Prevention. Program based on highest lead test result during calendar year 2002.

INFECTIOUS DISEASES

- The Asian and Pacific Islander population has lower rates of gonorrhea cases than the overall state population.
- The rate of chlamydia is approximately 1.5 times higher in the Asian population than in the overall state population.
- During 2003, the rate of tuberculosis cases was 8.5 times higher for Asians and Pacific Islanders than it was for the overall state population.

MATERNAL AND CHILD HEALTH

- The state population as a whole has better maternal and child health outcomes than the Asian and Pacific Islander population.
- A higher percent of Asians and Pacific Islanders give birth as a teenager than the overall state teen population.
- More than 1.5 times as many Asian Americans grow up in poverty as the overall state population.



ACCESS TO HEALTHCARE

• A *lower* percent of Asians and Pacific Islanders in Rhode Island report having health insurance than in the overall state population, and *fewer* Asians report having an on-going source of healthcare than the overall state population.

2004 Minority Health Fact Sheets prepared by:

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Table F: Indicators of Access to Healthcare

	ASIAN	STATE
Percent of adults less than 65 years old that report having no health insurance*	14.5	9.5
Percent of adults that report a specific source of on-going healthcare*	74.5	84.4
Percent of population (all ages) stating usual source of care as none or emergency room**	11.7	5.1
Percent of women aged 40+ that report receiving a mammogram in the past 2 yrs*	+	91.3
Percent of women that reported having a pap test in the past 2 yrs*	+	87.8
Percent of adults that said "yes" when asked if there was a time they could not afford to see a doctor**	8.1	7.8

SOURCES: *RI Behavioral Risk Factor Surveillance System 2000-03, Healthy People 2010 (2000-03 frequencies).

For more information regarding minority health and the statistics contained in this report, please contact:

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^{**}Health Interview Survey, 2001.

⁺Data too small for meaningful analysis.